



# MUNICIPALITY OF BETHEL PARK

Municipal Building . 5100 West Library Avenue . Bethel Park, PA 15102 . 412-831-6800 . [www.bethelpark.net](http://www.bethelpark.net)

## BEEKEEPING PERMIT APPLICATION

SECTION 69.35.4.8. "SPECIFIC STANDARDS FOR BEEKEEPING" PERTAINING TO THE BETHEL PARK MUNICIPAL ORDINANCE 7-12-93A IS ENFORCED

**Applicant/Owner:**

**Site Address:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

*My signature on behalf of or as the Owner for this permit constitutes my verification that the statements contained herein are true and I am subject to the penalty of 18 Pa. C.S.A. §4904 relating to unsworn falsification to authorities.*

Applicant's Signature: \_\_\_\_\_

**SQUARE FEET OF LOT:** \_\_\_\_\_

**QUANTITY OF HIVES REQUESTED:** \_\_\_\_\_

**LOCATION:**  Front  L. Side  R. Side  Rear

**CORNER LOT**  YES  NO

**ARE NUCLEUS COLONIES ANTICIPATED DURING APPROVED TIMEFRAMES?**  YES  NO

If yes, how many? \_\_\_\_\_

**WILL HIVES BE LOCATED LESS THAN 10 FEET FROM PROPERTY LINES\*?**  YES  NO

\*Per Section 69.35.4.8, flyway barriers are required for hives less than ten feet from property lines. Flyway barriers are not required if adjoining property is undeveloped, zoned agricultural or industrial, or is in a state game land, state park, national forest, stat forest, natural park, or conservation area with no pre-existing human or horse trails located within 25 feet of the property line.

**For Department Use Only:**

**Requirements for Submittal:**

- 1.) A Copy of the property survey outlining the location of hives, water source, and flyway barriers (if applicable);  YES  NO
- 2.) Written evidence of 8-hour beekeeping education course/program; or, Letter of Validation from the PA State Beekeepers Association;  YES  NO
- 3.) Written permission from property owner or landlord (if applicable);  YES  NO

**Zoning:** Lot Coverage:  PASS  FAIL

Set-Backs:  PASS  FAIL

Height  PASS  FAIL

Located within an easement?  YES  NO

Current Zoning District \_\_\_\_\_

Reviewed by the Zoning Hearing Board  YES  NO

Application No. \_\_\_\_\_

Approved  YES  NO; if NO Reason: \_\_\_\_\_

**Zoning Officer Signature** \_\_\_\_\_

**Permit Fees**

General \$10.00

Zoning \$50.00

**TOTAL \$60.00**